

UNITED STATES HOUSE OF REPRESENTATIVES  
ETHICS IN GOVERNMENT ACT

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U.S. HOUSE OF REPRESENTATIVES

2008 FINANCIAL DISCLOSURE STATEMENT  
(for 2007 Calendar Year Reporting Period)

Please provide the following information. Your address, telephone number, and signature WILL NOT be made available to the public.

Charles W. Dent

(202) 225-6411

(Print Full Name)


(Daytime Telephone)

3626 Evening Star Terrace Allentown, PA 18104-4546

(Complete Address -- Office or Home)

**CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED**

The attached Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct or its designee. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file the attached report may be subject to civil penalties and criminal sanctions (See U.S.C. app. 4, § 104 and 18 U.S.C. § 1001).

Certification	Signature of Reporting Individual	Date (Month, Day, Year)
I CERTIFY that the statements I have made on the attached financial disclosure statement and all attached schedules are true, complete, and correct to the best of my knowledge and belief.		7/17/08

UNITED STATES HOUSE OF REPRESENTATIVES  
FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 2007

FORM A  
For use by Members, officers, and employees

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Charles W. Dent  
(Full Name)

(202) 225-6411  
(Daytime Telephone)

(Office Use Only)

Filer Status ☒ Member of the U.S. House of Representatives State: PA District: 15 ☐ Officer Or Employee Employing Office:

Report Type ☒ Annual (May 15) ☐ Amendment ☐ Termination Termination Date:

A \$200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$305 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$305 from one source)? If yes, complete and attach Schedule VII.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
III. Did you, your spouse, or a dependent child receive "unearned" income of more than \$200 in the reporting period or hold any reportable asset worth more than \$1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	IX. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
V. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Exemptions-- Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

BLOCK A		BLOCK B	BLOCK C	BLOCK D	BLOCK E
Asset and/or Income Source		Year-End Value of Asset	Type of Income	Amount of Income	Transaction
<p>Identify (a) each asset held for investment or production of income with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other assets or sources of income which generated more than \$200 in "unearned" income during the year. For rental property or land, provide a complete address. Provide full names of stocks and mutual funds (do not use ticker symbols). For all IRAs and other retirement plans (such as 401(k) plans) that are self directed (i.e., plans in which you have the power, even if not exercised, to select the specific investments), provide the value and income information on each asset in the account that exceeds the reporting threshold. For retirement plans that are not self-directed, name the institution holding the account and its value at the end of the reporting period. For an active business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A. For additional information, see the instruction booklet.</p> <p>Exclude: Your personal residence(s) (unless there is rental income); any debt owed to you by your spouse, or by your or your spouse's child, parent or sibling; any deposits totaling \$5,000 or less in personal savings accounts; any financial interest in or income derived from U.S. Government retirement programs.</p> <p>If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC) or is jointly held (JT), in the optional column on the far left.</p>		<p>at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."</p>	<p>Check all columns that apply. Check "None" if asset did not generate any income during the calendar year. If other than one of the listed categories, specify the type of income by writing a brief description in this block. (For example: Partnership income or Farm Income)</p>	<p>For retirement plans or accounts that do not allow you to choose specific investments, you may write "NA" for income. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, even if reinvested, should be listed as income. Check "None" if no income was earned.</p>	<p>Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.</p>
JT	Bank of America (checking/savings)	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
SP	American Bank (savings)	\$1 - \$1,000	INTEREST	\$1 - \$200	
JT	American Bank (savings)	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
DC-1	Lafayette Ambassador Bank (Savings)	\$1 - \$1,000	INTEREST	\$1 - \$200	
DC-2	Lafayette Ambassador Bank (Savings)	\$1 - \$1,000	INTEREST	\$1 - \$200	
DC-3	Lafayette Ambassador Bank (Savings)	\$1 - \$1,000	INTEREST	\$1 - \$200	

# LE III - ASSETS AND "UNEARNED" INCOME

Name Charles W. Dent

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JT	Aflac, Inc (Common)	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
JT	Bank of America (Common)	\$15,001 - \$50,000	DIVIDENDS	\$1,001 - \$2,500	
JT	I-shares Dow Jones Select Index Fund	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	P
JT	Powershares Intl Divd Achievers Portfolio	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	P
JT	PIMCO FD PAC INVT MGMT All Asset FD CL C	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
JT	Nuveen Municipal Value Fund	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	P
JT	Wachovia Securities Bank Deposit Sweep Option	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
JT	Agere Systems Inc	None	None	NONE	S
JT	Air Products and Chemicals	None	DIVIDENDS	\$1 - \$200	S
JT	Alcatel-Lucent	None	none	NONE	S
	Wachovia Securities Bank Sweep Option (IRA)	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
	I-Shares Dow Jones Select Dividend Index Fund (IRA)	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
	Gabelli Equity Trust (IRA)	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
	Gabelli Healthcare & Wellness SRX (IRA)	\$1 - \$1,000	DIVIDENDS	\$1 - \$200	P

# TABLE III - ASSETS AND "UNEARNED" INCOME

Name Charles W. Dent

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	Gabelli Utility Trust (IRA)	\$1 - \$1,000	DIVIDENDS	\$1 - \$200	
	Wachovia Securities Bank Sweep Option (Beneficial IRA)	\$1 - \$1,000	INTEREST	\$1 - \$200	
	Van Kampen Government SEC FD CL A (Beneficial IRA)	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	PS(part)
DC-1	Wachovia Securities Bank Sweep Option	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
DC-1	I-Shares Dow Jones Select Dividend Index Fund	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
DC-1	Flagstaff Bank CD	\$1,001 - \$15,000	INTEREST	\$201 - \$1,000	
DC-1	Legg Mason Partners Equity Fund CL O	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
DC-1	Ellsworth Conv Growth & Income Fund	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	P
DC-1	Capital One Bank CD	None	INTEREST	\$201 - \$1,000	
DC-3	Wachovia Securities Bank Sweep Option	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
DC-3	I-Shares Dow Jones Select Dividend Index Fund	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
DC-3	Flagstaff Bank CD	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
DC-3	AllianceBernstein Growth & Income FD CL B	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
DC-3	Alliance Large Cap Growth	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	

# LE III - ASSETS AND "UNEARNED" INCOME

Name Charles W. Dent

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DC-3	Ellsworth Conv Growth & Income Fund	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	P
DC-3	Discover Bank CD	None	INTEREST	\$1 - \$200	
DC-2	Wachovia Securities Bank Sweep Option	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
DC-2	I-Shares Dow Jones Select Dividend Index Fund	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
DC-2	Flagstar Bank CD	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
DC-2	Alliance Large Cap Growth	\$1 - \$1,000	DIVIDENDS	\$1 - \$200	
DC-2	Oppenheimer Quest Opportunity Value Fund CL C	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
DC-2	Van Kampen Harbor Fund CL A	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
DC-2	Ellsworth Conv Growth & Income Fund	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	P
DC-2	Capital One Bank CD	None	INTEREST	\$1 - \$200	
SP	American Euro Pacific Growth Fund CL C (IRA)	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
SP	Davis NY Venture FD CL C (IRA)	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
SP	Oppenheimer Small & Medium Cap Value FD CL C (IRA)	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
SP	Loomis Sayles Strategic Income Fund CL C (IRA)	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	

# TABLE III - ASSETS AND "UNEARNED" INCOME

Name Charles W. Dent

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JT	Treasury Fund Daily Money Class	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200
JT	AFLAC Inc. (Common)	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000
JT	Wachovia Corp (Common)	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000
	Commonwealth of PA Deferred Compensation Program (457 Plan--Not Self Directed)	\$50,001 - \$100,000	n/a	n/a
	Pennsylvania State Employees Retirement System (Pension--Not Self Directed)	\$50,001 - \$100,000	n/a	n/a
JT	PA Tap Account (529 plan--Prepaid Tuition)	\$1,001 - \$15,000	n/a	n/a
	TIAA-CREF Traditional Long-Term Bond Fund 403(B) Plan	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000
	TIAA-CREF Stock Fund 403(B) Plan	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000

# TABLE IV - TRANSACTIONS

Name Charles W. Dent

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Report any purchase, sale or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction or series of transactions exceeded \$1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. Provide a brief

SP, DC, JT	Asset	Type of Transaction	Date	Amount of Transaction
JT	I-shares Dow Jones Select Index Fund	P	01-16-07	\$1,001 - \$15,000
JT	Powershares Intl Divd Achievers Portfolio	P	01-16-07	\$1,001 - \$15,000
JT	Nuveen Municipal Value Fund	P	01-16-07	\$1,001 - \$15,000
JT	Agere Systems Inc	S	01-16-07	less than \$1001
JT	Air Products and Chemicals	S	01-16-07	\$1,001 - \$15,000
JT	Alcatel-Lucent	S	01-16-07	less than \$1001
	Gabelli Healthcare & Wellness SRX (IRA)	P	06-29-07	less than \$1001
	Van Kampen Government SEC FD CL A (Beneficial IRA)	PS(part)	12-24-07	less than \$1001
DC-1	Ellsworth Conv Growth & Income Fund	P	07-19-07	\$1,001 - \$15,000
DC-3	Ellsworth Conv Growth & Income Fund	P	07-19-07	\$1,001 - \$15,000
DC-2	Ellsworth Conv Growth & Income Fund	P	07-19-07	\$1,001 - \$15,000



# TABLE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Charles W. Dent

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Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$305 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure-- Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Days not at sponsor's expense
American Israel Education Foundation	Aug. 4-12	Newark/Tel Aviv/Newark	Y	Y	Y	0

# MODULE IX - AGREEMENTS

Name Charles W. Dent

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Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
2007	Charles W. Dent & Commonwealth of PA	Health insurance provided by Highmark Blue Shield